Mental Health Services Act MHSA Stakeholder and Community Planning Meeting Minutes Lake County Behavioral Health Services Meeting of July 25, 2019

Location: Circle of Native Minds Wellness Center **Start Time:** 10:00am

<u>In Attendance</u>: 55 total in attendance according to sign-in sheet; Organizations recognized: Mother-Wise, Redwood Community Services (Harbor, Arbor, NEST), Lake County Behavioral Health Services, Lake County Office of Education, Adventist Health, Lake Family Resource Center, L.C. Helping Hand, AH Livewell, Supervisor Moke Simon, Upper Lake Unified, Paragons, First 5, Konocti Senior Support, Resource Development Associates (RDA)

Opened: 10:05am

1. Topic: Review MHSA and discuss how to improve MHSA services in Lake County

Discussion:

Valerie Kirby from RDA – Opened the meeting with discussing the results of behavioral health needs assessments, strategies to improve MHSA services moving forward, and reviewed the MHSA programs in Lake County.

Highlighted points

• Purpose of Annual Update

- o MHSA Stakeholders identified service gaps and developed strategies to address behavioral health needs in the County's three year 2017-2020 plan.
- o An update is required each year of the program to identify and address progress, challenges, and changes.

• Community Input

- o Community stakeholder input plays an integral part in the annual update process.
- o Feedback gathered during this meeting will help shape the MHSA program for the coming year.
- Feedback gathered next spring will be used in the 2020-2023 Three-Year Plan. This
 may include larger, new, or different changes; therefore, stakeholder attendance is highly
 encouraged.

• Three-Year Plan Recap: 2017

For the Three-Year Program plan for FY 2017-2020 stakeholders identified the following needs and changes:

• Key Strengths

- LCBHS has increased access to services, through consumer-centered care coordination and culturally-responsive services
- LCBHS staff are dedicated to helping the community and do whatever it takes to serve consumers of mental health services

• Key Needs

Lake County faces challenges similar to other rural and small counties:

- o Difficulty retaining staff which leads to reduced staff capacity
- o Transportation challenges
- o Stigma and anonymity
- o Challenges of growing up in a small, rural county
- o Challenges of a critical incident response team in the community

• Three-Year Plan Program Modifications

- **o** Community Services Support (CSS)
- o Enhance Forensic Mental Health Program by including Mental Health Court
- o Leverage existing coordination systems to improve referral process

• Prevention & Early Intervention (PEI)

- o Develop Critical Incident Stress Management Team
- o Implement NEST component of the Family Stabilization and Well-Being Program
- o Incorporate stigma reduction activities into current programs
- Explore opportunities to provide parenting workshops as a part of the Peer Recovery Support Center
- Explore opportunities to enhance Friendly Visitor Program and Senior Counseling Program

• Innovation (INN)

- o Continue implementation of Phase I (develop Closed Loop Referral System)
- o Continue designing and piloting stages of Phase II: Virtual Care Coordination

• Workforce Education & Training (WET)

Enhance WET through specialized trainings

• Capital Facilities & Technological Needs (CFTN)

o None

• MHSA Programs for FY 2017-2020

- Community Services and Supports (CSS)
- o Provides a full array of recovery-oriented services for adults experiencing severe mental illness and children experiencing serious emotional disturbance
- Example: Full Service Partnership (FSP): Engage clients with serious emotional disorders and individuals with serious mental illness into team-based and culturally appropriate services.

• Prevention and Early Intervention (PEI)

- o Promote wellness and engage individuals prior to the development of serious mental illness or emotional disturbance
- o Example: **Four Peer Support Wellness Recovery Centers** spread throughout Lake County that offer a variety of education, prevention, early intervention service,

programs, and activities. PEI funds are used to support the services provided in the Peer Support Centers'.

• Innovation (INN)

- o Create opportunities to learn something new that has the potential to enhance the behavioral health system
- Example: Closed Loop Referral System An online information portal that provides accessible tools, facilitates consumer-provider communication, increase interagency communication, and provides service information.

• Capital Facilities and Technology Needs (CFTN)

- o Plan the creation of MHSA services facilities to house services and administrative offices
- o Develop technological needs to facilitate efficient and quality services
- o Example: Capital Facilities Funding for building projects and building renovations

Scott Abbott – MHSA Program Manager for Lake County Behavioral Health Services Presents:

- We are finishing up Fiscal Years 18-19 and 19-20 and looking ahead to our next 3-year plan.
- We are caught up on our revenue and expense report and have identified a surplus in our CSS and PEI funds; we need to spend this to avoid reversion back to the state
- Funds from CSS to WET and CFTN were not transferred from previous years
- Prudent Reserve is \$361,273.26 over, based on new prudent reserve requirements
- LCBHS is looking to create another wellness center in Middletown

Scott Abbott – (Con't) Opportunities

- \$982,537.34 in CalHFA; \$557,845 in NPLH grant
- Unspent MHSA Funds, not including interest as of FY-17/18
- CSS \$5,353,867.57
- PEI: \$1,903,996.77
- INN: \$587,053.11
- Lake County FY 18-19 distribution: \$3,303,242.06
- CSS: \$2,510,463.97
- PEI: \$627,615.99
- INN:\$165,162.10
- Estimated Lake County FY 19-20 distribution: \$4,193,678.30
- CSS: \$3,187,195.51
- PEI: \$796,798.88
- INN: \$209,683.92
- Funds to be transferred from Prudent Reserve to CSS by 6/30/2020: \$361,273.26

Scott Abbott (Con't) – Ideas for Now and the Future

- o Three year plans need to match the County budget
- o Transfer funds from Prudent Reserve to CSS (\$400,000)
- o Plans to expand the programs we already have
- o Increase efforts to bring conserved clients back to the County
- o Build supportive housing
- o Create Prevention Program
- o Increase Partnerships with Senior Centers
- o Develop E-Learning system
- Utilize better tracking tools

Stakeholder comments and expressed concerns:

- Generational trauma and environmental factor in Native communities
- Perinatal substance abuse
- Displacement of children
- There is room for improvement on discharge and release planning

Brock Falkenberg (LCOE) presents gaps with youth

- Breaking the cycle
- Serving children, parents, and families
- "Bridge the gap" to support school aged children
- Wants to provide ACE training

Tawny Bailey – RCS (The Harbor, TAY, NEST) presents ideas about providing services

- Met with Brock from LCOE and met with LCBHS
- Understands transportation needs and trying to figure out mobile services
- Programs are partially funded by MHSA

Jaclyn Ley (Mother-Wise) – Post Partum/Prenatal Moms

- Program is for Moms and Dads, parents, foster parents
- Office on main street near a bus stop to help transportation needs; although transportation is still an issue
- Understands transportation needs and trying to figure out mobile services
- Mother-Wise is funded by MHSA but still not enough funding carried over from First 5 grant.
- There is a need for Spanish speaking mothers.

Michael Ray - Adventist Health

- Adventist health has programs for supportive living services group
- Anger management for individuals
- Crisis management
- Receives funding through RCRC

Cathy Miller - Case Manager LCBHS

- Performing outreach; working with families that want more support with intellectual disabilities
- Need support groups for children, parents, and families with disabilities and mental health related issues

Melissa Simons – Mother-Wise – expressed interest in:

- Special needs advocacy support and peer support groups
- Age support and parent support groups to reduce isolation

Valerie Kirby – RDA

• We can explore and identify opportunities of what is not covered for people with disabilities

Representative from RCS - The Harbor

- There is an issue with homeless youth and they have nowhere to go
- Homeless youth need somewhere to sleep in order to be more effective with mental health services
- Need to engage with law enforcement

Annie Barnes – Paragons

• Need to address the homeless and the at risk of homelessness; we should also try to catch people who are risk of homelessness

Volunteer/Stakeholder -

• We need to let the community know the services that are out there

Jerry - Stakeholder

• People love getting food – food is really important and enriches the community

Michelle Monlo - LCBHS Circle of Native Minds

- Big Oak Peer Support Center in Clearlake Oaks does food drives
- Mother-Wise utilizes the food option a lot
- Need a private active Facebook group for the moms; get mothers connected to SNAP

Stakeholder suggestion:

• Put more funding into staff and training

Resident of the NEST (RCS) -

• Would like more funding because the program has changed her life

Stakeholder -

• How do we address the unspent funds?

Scott Abbott- LCBHS MHSA Program Manager

• Explains we have to go through the stakeholder process much like today

Identified Service Strength and Needs: Service Access & Utilization – Cultural Competency

- Perceived or anticipated stigma can limit access; stigma including but not limited to: race/ethnicity, behavioral health, and LGBT2Q + status
- Fear of deportation
- Need for workforce to be culturally reflective especially for Latinos, Native Americans, African Americans
- LGBT2Q + cultural competency, particularly transgender cultural competency
- Trauma informed care and cultural trauma knowledge for specific populations

Stakeholder Input

• Hispanic population keeps falling through the cracks; Spanish speaking is important to communicate and build trust

Identified Strengths and Needs: Services for children and TAY

- Children and TAY were identified as having the highest need for mental health services
- Desire to grow prevention services, wellness and engagement activities
- Desire for early identification of emerging needs such as crisis; need earlier involvement of mental health services as opposed to law enforcement

Service Strengths and Needs for Adults and Seniors

- Prevention (suicide, substance use) services have grown
- Wellness centers have positive impact
- Seniors experience isolation, health and mobility issues; need more caregiver support
- More socialization and engagement activities needed (for all ages)

Service Strength and Needs for Collaboration and Referral

- Need for more care coordination and communication (improved but room to grow)
- Improve discharge/release planning
- Need for improvement of interagency knowledge and referrals

Service Strength and Needs Workforce and Providers

- Long wait times attributed to workforce shortages; wellness centers designed to help with this
- Staff experiencing turnover, burnout, crowded spaces; need for higher wages to support retention
- Desire for more training on trauma, client-centered care, specific cultural competency, co-occurring substance use disorders, and policies, and procedures.

Other Strength and Needs:

- Wildfires have a significant impact on mental health
- Perceived high substance abuse in the county
- Stigma reduction training could improve mental health awareness and compassion

Scott Abbott - MHSA Program Manager - LCBHS

- Stakeholder meeting will be held quarterly
- Trying to build a stronger Mental Health Advisory Board
- We would like to have people serve on the Mental Health Advisory Board

Requirements for the Mental Health Advisory Board

- Cannot be a government employee or a contractor of LCBHS
- Contact Scott Abbott for more information: scott.abbott@lakecountyca.gov

Upcoming Meetings:	Minutes Prepared by:
 Next MHSA Quarterly Meeting: October 24, 	
2019	Morgan Hunter
• Public Hearing on September 30 th	**Some info taken from PP slides**